

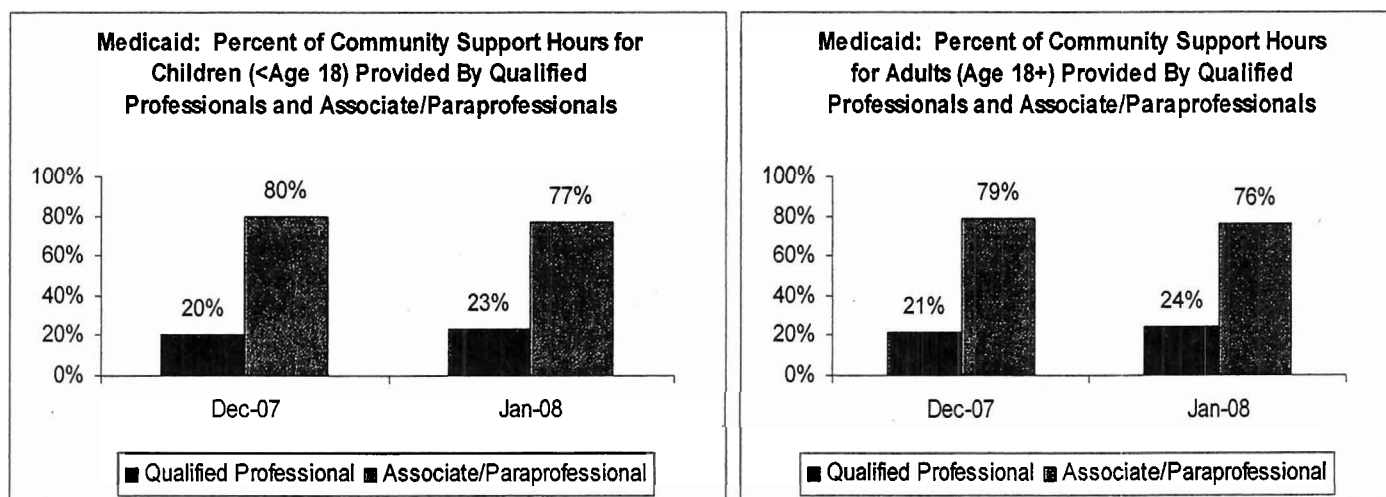
Services by Qualified Professionals, Associate Professionals and Paraprofessionals

Within each provider agency endorsed to deliver Community Support services, the Qualified Professional (QP) is charged with the coordination and oversight of initial and ongoing assessment activities, ensuring linkages to the most clinically appropriate services, and with the facilitation of the Person Centered Planning process. In order to provide case management support the Associate Professional (AP) and the Paraprofessional (PP), are responsible for assistance with therapeutic interventions and skill building under the supervision of the Qualified Professional.

To ensure adequate involvement and oversight by a Qualified Professional, clinical policy requires that a minimum of 15% of Community Support services per recipient be provided by the Qualified Professional. Each endorsed provider site is also expected to bill a minimum of 25% to Community Support services by the Qualified Professional. In order to monitor activity of the Qualified Professional and Associate Professional and Paraprofessional requirement, a breakdown of units provided by each level of professional was added to the billing requirements in December 2007. Units are billed in 15 minute increments, with the required modifier designating the level of the staff providing the service.¹

In December 2007 and January 2008 (Figure 1.5 below), over 20% of Medicaid-funded Community Support (CS) hours billed for children and adults were provided by a QP, which exceeded the minimum requirement. During both months between 76-80% of Community Support hours were provided by an AP or PP, which was within an acceptable limit.

Figure 1.5
Medicaid-Funded Services



¹ Clinical Coverage Policy No.:8A. Division of Medical Assistance: Enhanced Mental Health and Substance Abuse Services. Effective March 1, 2008. pp. 26-38.

In December 2007 and January 2008 (Figure 1.6 below), over 34% of State-funded CS hours billed for children were provided by a QP, and over 65% was provided by an AP or PP. In contrast, over 64% of State-funded CS hours billed for adults were provided by a QP, which exceeds the minimum requirement. During both months over 35% of CS hours for children and adults were provided by an AP or PP, also exceeding the minimum requirement.

Figure 1.6
State-Funded Services through IPRS

